

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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OCT 3 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s):	pyist(s): Paul A. Worsowicz; Erik W. Taylor; Lisa K. Shapiro, Ph.D.; Ari B. Pollack; Heidi L. Kroll; Sara K. Bosiak		
II. Name of Lobbyişt's part	nership, firm or corporation, if any:		
603-228-1181	GALLAGHER, CALLAHAN & 214 North Main Street, Con 603-226-3334		
(Telephone)	(Fax)	(Email)	
reportable expense transacti	ons which are not attributable to any o		
X All reportable transact	ions occurring in the month prior to the r	eporting date relative to the following client.	
	AGGREGATE MANUFAC		
(Fu	Il Name of Client as it appears on the Lo	obyist Registration Form)	
unrelated to any partic		st's family), or the lobbying firm listed below which are July 25, 2018	
	rom date of registration to 3/31/18	activity from 4/1/18 to 6/30/18	
		_	
	October 31, 2018 🔀	January 30, 2019 2019	
activity	from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18	
	received and no reportable transaction te just this form and submit it to the Secre	s made since the last report. stary of State's Office, State House, Room 204,	
VI. Check if additional rep			
X If you have received for	ees or made expenditures, you must file A	Addendum A – Fees and Expenses	
Expense Reimburseme	ent	ust file Addendum B – Report of Honorariums or	
If you, your firm, or yo	our family has made political contribution	ns, you must file Addendum C – Political Contributions	
Sworn Statement/Affirmation I have read RSA 15, RSA 15-1 to the best of my knowledge a	B and RSA 664 and hereby swear or affir	m that the foregoing information is true and complete	
1-1011	•	15-18-18	
(Signature of Lobbyist)	esarez	(Date)	

Paul A. Worsowicz

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

Date

October 31, 2018

I. Name of Lobbyist(s)	Paul A. Worsowicz; Erik W. Taylor; Lisa K. Shapiro, Ph.D.; Ari B. Pollack; Heidi L. Kroll; Sara K. Bosiak		
II. Name of lobbyist's partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRELL, P.C.		
	(Name of partnership, firm or corporation)		

AGGREGATE MANUFACTURERS OF NH

IV. Fees Received

III. Name of Client

Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, to lobbying, including fees for services such as public advocacy, government relations, or public relations services, including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:

a) Total of all fees received in this reporting period	a) \$	7,742.50
b) Total of all fees received this calendar year, prior to this reporting period. (This should equal the total prior monthly reports for this calendar year.)	b) \$	35,680.00
c) Total of all fees received to date. (Add lines a and b)	c) \$ 	43,422.50
d) Indicate the amount of any such fees that are due, but have not yet been paid.	d) \$.00

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ b) \$	7,562.50
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	c) \$.00
c) Total of all itemized expenditures reported in detail in section VI.		.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: AGGREGATE MANUFACTURERS OF NH		
d) Total expenses for this reporting period.		
(Add lines a, b and c.)	d) \$	7,562.50
e) Total of expenses paid this calendar year, prior to this reporting period.		
(This should be the amount on line f of addendum A for last month's report.)	e) \$	33,947.50
f) Total of all expenses year to date.	f) \$	41,510.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying period, including by whom paid or to whom charged.	fees during this	reporting
Paid to:	¢	ount
	\$	
	<u> </u>	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the is true and complete to the best of my knowledge and belief.	ne foregoing in	nformation
(Signature of Johnson)	0 -/8/8 (Date)	
(Signature of lobbyist)	(Date)	
Paul A. Worsowicz		

(Print Name of Lobbyist)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:			
Name of Lobbying	partnership, firm or corpor	ration: GALLAGHER, CAI	LLAHAN & GARTRELL, P.C.
Name of Client (lea particular client):	ve blank if Statement is fo Aggregate Manufactur		rporation and not related to any
Date of Report (che	eck one):		
April 25, 2018 🗆	July 25, 2018 □	October 31, 2018	January 30, 2019 □
		e Statement of Income and E stement (insert the number of	xpenses described above, and the f Addendum forms being
1 Addendum A(s).		
0 Addendum B(s).		
0 Addendum C(s).		
	of my knowledge and bel		nd each Addendum is true and
(Print Name of lob	byist)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affi Statement of Income	•		
Name of Lobbying par	tnership, firm or corpor	ration: GALLAGHER, CAL	LLAHAN & GARTRELL, P.C.
•	blank if Statement is fo Aggregate Manufactur	• • • •	rporation and not related to any
Date of Report (check	one):		
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018	January 30, 2019 🗆
		e Statement of Income and Externent (insert the number of	spenses described above, and the Addendum forms being
1 Addendum A(s).			
0 Addendum B(s).			
0 Addendum C(s).			
I hereby swear or affirm complete to the best of			nd each Addendum is true and
AKS.			10-22-18
(Signature of Lobbyist			(Date)
Lisa K. Shapiro, Ph.D. (Print Name of lobbyi			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Af Statement of Income	firmation by Lobbyist and Expenses for:		
Name of Lobbying pa	ertnership, firm or corpor	ration: GALLAGHER, CAI	LLAHAN & GARTRELL, P.C.
•	e blank if Statement is fo Aggregate Manufactur		rporation and not related to any
Date of Report (check	k one):		
April 25, 2018 □	July 25, 2018 □	October 31, 2018	January 30, 2019 □
		e Statement of Income and Externent (insert the number of	xpenses described above, and the Addendum forms being
1 Addendum A(s)			
0 Addendum B(s)			
0 Addendum C(s)			
	rm that the foregoing inf of my knowledge and be		nd each Addendum is true and
(Signature of Lobbyi	st)		(Date)
Ari B. Pollack (Print Name of lobb	yist)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Statement of Inco	me and Expenses for:		
Name of Lobbying	partnership, firm or corpor	ration: GALLAGHER, CAL	LAHAN & GARTRELL, P.C.
Name of Client (leaparticular client):	ave blank if Statement is for Aggregate Manufactur	- · ·	poration and not related to any
Date of Report (ch	eck one):		
April 25, 2018 🗆	July 25, 2018 □	October 31, 2018	January 30, 2019 □
		e Statement of Income and Ex atement (insert the number of	penses described above, and the Addendum forms being
1 Addendum A	(s).		
0 Addendum B	(s).		
0 Addendum C	(s).		
•	ffirm that the foregoing int it of my knowledge and be		nd each Addendum is true and
Hirl: 2	. Koy		10:04.18
(Signature of Lobb	oyist)		(Date)
Heidi L. Kroll (Print Name of lo	bbyist)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

	Affirmation by Lobbyist me and Expenses for:		
Name of Lobbying	partnership, firm or corpor	ration: GALLAGHER, CAL	LLAHAN & GARTRELL, P.C.
Name of Client (le particular client):	ave blank if Statement is fo Aggregate Manufactur		rporation and not related to any
Date of Report (ch	eck one):		
April 25, 2018 🗆	July 25, 2018 🗆	October 31, 2018 🔀	January 30, 2019 □
		e Statement of Income and Ex atement (insert the number of	spenses described above, and the Addendum forms being
1 Addendum A	u(s).		
0 Addendum B	(s).		
0 Addendum C	c(s).		
	affirm that the foregoing in st of my knowledge and be		nd each Addendum is true and
Sana	Busial		Oct 17,2018
(Signature of Lob	byist)		(Date)
Sara K. Bosiak (Print Name of lo	bbyist)		